Revision: HCFA-PM-95-4 (HSQB) Attachment 4.35-A JUNE 1995

STATE State/Terr			THE SOCIAL SECU	JRITY ACT
ELIGIBILITY CONDITIONS AND REQUIREMENTS				
Enf	orcement of	Compliance f	for Nursing Faci	lities

The State uses other factors described below to determine the seriousness of deficiencies in addition to those described at \$488.404(b)(1):

TN No. Approval Date: 10/30/95-Supersedes TN No. 90-7 Effective Date: 7-/-95